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APPLICATION NO. F	FILING DATE		FIRST NAMED INVENT		ATTO		EY DOCKET NO.	CONFIRMATION NO.		
10/811,572 03/29/2004 TITLE OF INVENTION: PACKAGE WITH INTEGRATED INDUCTOR		James F. Detry AND/OR CAPACIT	•		H0002921DIV1 (1016.115210		2070			
APPLN. TYPE SMALL	ENTITY IS	SUE FEE DUE	PUBLICATION FEE D	UE	PREV. PAID ISSUE	FEE T	OTAL FEE(S) DUE	D/	ATE DUE	
nonprovisional 1	NO.	\$1400	\$300		\$0	\$1700		11	/14/2006	
EXAMINER		ART UNIT	CLASS-SUBCLASS	5						
MITCHELL, JAMES M		2813	438-106000							
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(1) the names of too ragents OR, alter (2) the name of a registered attorney 2 registered patent	the names of up to 3 registered patent attorneys gents OR, alternatively, the name of a single firm (having as a member a stered attorney or agent) and the names of up to egistered patent attorneys or agents. If no name is ad, no name will be printed.						
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) HONDISHOWN, NEW JEYSEY Please check the appropriate assignee category or categories (will not be printed on the patent):										
4a. The following fee(s) are submitted. ☐ Issue Fee ☐ Publication Fee (No small enterprise of Copies) ☐ Advance Order - # of Copies	A check is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number (enclose an extra copy of this form).									
5. Change in Entity Status (from status indicated above) a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2). NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in										
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Authorized Signature Typed or printed name	on Sch Jori R. Sc	Hman			Date	ctob 	er 24, 5 57, 628	1-006		
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